

CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i> Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	<i>Application Number</i>	09/940,982
	<i>Filing Date</i>	August 29, 2001
	<i>First Named Inventor</i>	T. ENDO et al.
	<i>Art Unit</i>	2437
	<i>Examiner Name</i>	Z. Davis
	<i>Attorney Docket Number</i>	NIT-295

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number **32,846**
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration.
See 37 CFR 1.33(a)(1). Registration Number _____

Signature

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NOTE: Signatures of all the inventors or assignee of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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